Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>6/29/10</u>	Address:	911 Hale Road Lot 30	
Case #:	<u>52F-48389</u>		Shelbyville, IN 46176	
County:	Shelby			
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)				
	onal Lab al/Glassware/Equipment (only) ite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:	
Items Found: Location (bedroom, kitchen, open air, etc)				
(check all that apply) Lithium/Ammonia Reaction(s):				
Red Phosphorous/Iodine Reaction(s):				
Flammable Solvents: Bedroom, Bathroom and Open Air				
☐ Water Reactive Metal (Lithium):				
Anhydrous Ammonia:				
Hydrochloric Acid Gas Generator(s): Open Air				
Corrosive Acid: <u>Bathroom</u>				
Corrosive Base:				
Other (item and location):				
Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services		☐ Ephedrin ☐ Retail/M	Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:	
This report is to be faxed to the following agencies that serve the location:				
Fire Depart	ment: Shelbyville Fire	Fax: <u>317-392-5119</u>		
Health Department: Shelby Co.		Fax: <u>(317)</u> Fax:		
Child Prote	ction Service: <u>N/A</u>		-	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Tom Egler Phone 317-234-4591				

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.